2012 Statewide Accessibility Awards Program

Nomination Form





A Program presented by the APA – Accessibility Professionals Association (formerly TRASA - Texas Registered Accessibility Specialists Association) in partnership with the Texas Governor's Committee on People with Disabilities (GCPD)

GOAL:

To honor projects that implement universal design principles and service accessibility and that go beyond the minimum legal definition of accessibility.

SUBMISSION PROCESS:

Please fill out the following required information and return this Award Nomination Form in electronic CD or flash-drive format; a check to APA – Accessibility Professionals Association for the \$50 per project entry application fee; and mail or hand-deliver the payment to Ms. Shirley Knox, APA Executive Director @ 3355 Bee Cave Road, Suite 301B / Austin, TX 78746; OR, to Fred Cawyer @ 3819 Towne Crossing Blvd., Suite 111 / Mesquite, TX 75150 – by:

<u>Friday – 28 September 2012</u>

SITE / PROPERTY - PROJECT INFOR	MATION: EABPRJ#:			
Property Address (including zip code):				
PROPERTY OWNER INFORMATION:				
Name:	Signature:			
Address (including zip code):				
Telephone #:	Fax #:	Mobile Cell #:		
Email Address:				
Has the Property Owner been informed of this nomination? (Yes or No):				

NOMINATOR INFORMATION:				
Applicant's Name:				
Applicant's Address (including zip code):				
Affiliation / Relation to the Property:	I			
Telephone #:	Fax #:	Mobile Cell #:		
Email Address:				
TENANT INFORMATION (If applicable): Company / Firm Name / Primary Contact:				
Address (including zip code):				
Telephone #:	Fax #:	Mobile Cell #:		
Email Address:				
Has the tenant representative been informed	of this nomination? (Yes or	No):		
DESIGN PROFESSIONAL INFORMATION: Firm Name / Primary Contact:				
Address (including zip code):				
Telephone #:	Fax #:	Mobile Cell #:		
Email Address:				
Has the design professional been informed of this nomination? (Yes or No):				
CONSTRUCTION TEAM / GENERAL Company Name / Primary Contact:	CONTRACTOR INFORMA	TION:		
Address (including zip code):				
Telephone #:	Fax #:	Mobile Cell #:		
Email Address:				
Has the construction team been informed of this nomination? (Yes or No):				

APA MEMBER - REGISTERED ACCESSIBILITY SPECIALIST / RAS-OF-RECORD INFORMATION:					
RSA's	s Name:	RAS #:			
RAS's	Address (including zi	p code):			
Teleph	none #:	Fax #:	Mobile Cell #:		
Email	Address:				
Has the RAS-of-Record been informed of this nomination? (Yes or No):					
Please mailed owned accom Regula to be of Standa	d or e-mailed. ELIGIBI building or facility or modation; or, (3) a cor ation – Architectural B compliant with at least ards (T.A.S.) and Plan	l information as attachments to this form LE PROPERTIES MAY INCLUDE ANd that is leased or occupied by a state age immercial facility that is subject to the Tearriers (Removal) Division Program, and the minimum accessibility compliance we reviewed and Inspected by a State of Tearrier good standing of APA (formerly TRA)	NY: (1) public owned or privately ency; (2) a place of public exas Department of Licensing and ad that was designed and constructed with the Texas Accessibility Exas Registered Accessibility		
1. DESCRIPTION OF THE PROPERTY (Maximum 4,000 characters) Briefly describe the property's main service and accessibility characteristics, and what specific challenges that may have existed to meet the unique physical accessibility elements / issues.					
2.	2. ACCESSIBILITY COMPLIANCE THAT MAKES THE PROPERTY UNIQUELY WORTHY OF RECOGNTION (Maximum 4,000 Characters) Briefly state the significance of the property and its relevance to meeting the T.A.S. accessibility compliance. Describe some of the unique solutions to meet the accessibility issues.				

3. TO BE CONSIDERED FOR SELECTION, PLEASE INCLUDE:

- Ten, but no more than 20 .pdf or .jpeg photo images of the property on a CD or flash-drive; OR, transmit to Fred Cawyer by e-mail if the files are not too large to be accepted via the internet
- Completed Awards Nomination Form and any other documentation
- Map showing location of the proposed project (may be downloaded from the Internet)

grants APA and the Texa	pplication materials become the property is Governor's Committee on People with ame of the photographer to be properly c	Disabilities unlimited use of images.
PROPERTY OWNER	SIGNATURE:	
Printed Name	(Signature)	(Date)
NOMINATORS SIGNA	ATURE:	
Printed Name	(Signature)	(Date)

APPLICATION PROCESS:

PLEASE PAY THE \$50 APPLICATION FEE PER PROJECT SUBMITTAL BY CHECK OR MONEY ORDER WITH THE RETURNED <u>APA / GCPD AWARD NOMINATION FORMS</u> AND THE ELECTRONIC CD / FLASH-DRIVE DOCUMENTATION) POSTMARKED OR RECEIVED BY THE 09.28.2012 DEADLINE TO <u>EITHER</u>:

Ms. Shirley Knox – Executive Director
APA – Accessibility Professionals Association (Formerly TRASA)
3355 Bee Cave Road, Suite 301B
Austin, TX 78746
www.AccessibilityProfessionals.org

Fred D. Cawyer RAS – Chairman APA/GCPD Awards Program 3819 Towne Crossing Blvd., Suite 111 Mesquite, TX 75150 Office – 972.285.2445 fredcawyer@aol.com